

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	NAME	NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>SM</i>	<i>45</i>	<i>1/17/01</i>
FORMALITY REVIEW		<i>50861</i>	<i>2-6/01</i>
RESPONSE FORMALITY REVIEW	<i>Rm</i>	<i>781</i>	<i>04-12-01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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